



Atty. Dkt. No. 076507-0421

RCE/3638
#7
10/23/03
TMC

THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Baloga et al.
Title: UTILITY DISTRIBUTION
SYSTEM
Appl. No.: 10/026,964
Appl. Filing Date: 12/21/2001
Examiner: Kevin McDermott
Art Unit: 3632

<p align="center">CERTIFICATE OF MAILING</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450, on the date below.</p> <p align="center"><u>Scott D. Anderson</u> <small>(Printed Name)</small></p> <p align="center"><u><i>Scott D. Anderson</i></u> <small>(Signature)</small></p> <p align="center"><u>October 1, 2003</u> <small>(Date of Deposit)</small></p>

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

RECEIVED
OCT 09 2003
GROUP 3600

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. § 141, or the commencement of a civil action under 35 U.S.C. § 145 or § 146 (unless the appeal or civil action is terminated).

1. **Submission required under 37 C.F.R. § 1.114:** (check items that apply)

a. Previously submitted:

☐ Please enter and consider the amendment/reply previously filed on ____.

☐ Please consider the Affidavit(s)/Declaration(s) previously filed on ____ but not considered.

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770.00 OP

☐ Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ____.

☐ Other ____.

b. Enclosed are:

☒ Amendment/Reply.

☐ Affidavit(s)/Declaration(s).

☐ Information Disclosure Statement.

☐ Form PTO-1449 with copies of ____ listed reference(s).

☐ Other .

Miscellaneous:

☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e)				\$770.00	\$770.00
Total Claims:	<u>27</u>	<input type="checkbox"/> <u>26</u>	= <u>1</u>	x \$18.00	= <u>\$18.00</u>
Independents:	<u>3</u>	<input type="checkbox"/> <u>3</u>	= <u>0</u>	x \$86.00	= <u>\$0.00</u>
First presentation of any Multiple Dependent Claims:			+ \$290.00		= <u>\$0.00</u>
CLAIMS FEE TOTAL:					= <u>\$788.00</u>

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/> Extension for response filed within the first month:	\$110.00	\$110.00
<input type="checkbox"/> Extension for response filed within the second month:	\$420.00	\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$950.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,480.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,010.00	\$0.00
EXTENSION FEE TOTAL:		\$110.00
CLAIMS AND EXTENSION FEE TOTAL:		\$898.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
<input type="checkbox"/> Suspension of action requested under 37 C.F.R. § 1.103(c)		\$0.00
TOTAL FEE:		\$898.00

☐ Please charge Deposit Account No. 06-1447 in the amount of \$898.00. A duplicate copy of this transmittal is enclosed.

☒ Check No. 13031 in the amount of \$898.00 to cover the filing fee is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 10/1/03

By Scott D. Anderson

FOLEY & LARDNER
777 East Wisconsin Avenue, Suite 3800
Milwaukee, Wisconsin 53202-5306
Telephone: (414) 297-5740
Facsimile: (414) 297-4900

Scott D. Anderson
Attorney for Applicant
Registration No. 46,521